

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 091744681 FILING DATE 06 JUN 2001

APPLICANT(S)

Ben Hehuda

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		/				
2			/			
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50			/			
TOTAL IND.			5			
TOTAL DEP.			45			
TOTAL CLAIMS			50			

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IND.	DEP.	IND.	DEP.
51	1		
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100			
TOTAL IND.	2		
TOTAL DEP.	4		
TOTAL CLAIMS	6		

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